

HOW COULD THEY DARE TO DO THAT? I WONDERED.

THE ANSWER WAS ... THEY JUST DID.

**AND THEY FLAUNTED THEIR ABILITY TO BUY THEIR WAY INTO
THE MARKETPLACE OF IDEAS AND POLLUTE IT WITH THEIR
FALSE AND DEADLY INFORMATION.**

**I DO NOT BELIEVE THE UNITED STATES WILL EVER AGAIN BE A
GOOD MARKET FOR TOBACCO PRODUCTS. THE CURVE IS GOING
DOWN AND ACCELERATING.**

**BUT IF WE FEEL GOOD BECAUSE WE HAVE BEATEN THE
CIGARETTE INDUSTRY ON ITS OWN HOME TURF ... WE MUST
REALIZE THAT WE'VE DRIVEN THEM TO SCOUR THE REST OF THE
EARTH FOR NEW VICTIMS.**

**WHILE RECENT STATISTICS BRING US THE GOOD NEWS THAT
SMOKING IN THE UNITED STATES DROPPED ANOTHER 5% IN 1989,
WE ARE SADDENED AND OUTRAGED THAT AMERICAN TOBACCO
EXPORTS ROSE 20% LAST YEAR.**

**IN 1989 AMERICAN COMPANIES MADE 600 BILLION CIGARETTES;
100 BILLION OF THOSE CIGARETTES WENT OVERSEAS, OVER HALF
TO THE FAR EAST.**

**THE TOBACCO INDUSTRY -- AS YOU ALL KNOW, I AM SURE -- HAS
TARGETED THE LESS DEVELOPED AND DEVELOPING COUNTRIES
OF THE WORLD AS THEIR MOST PROMISING MARKETS FOR THE
1990s.**

**AS A RESULT, THOSE NATIONS ARE NOW BEGINNING TO
EXPERIENCE THE SAME RISE IN SMOKING-RELATED DISEASES
THAT WE EXPERIENCED A GENERATION AGO ... HEART DISEASE,
STROKE, AND CANCER OF THE LUNG, MOUTH, ESOPHAGUS, AND
STOMACH.**

**AS AN AMERICAN CITIZEN I AM APPALLED BY THIS CORPORATE
BEHAVIOR OF AMERICAN COMPANIES AND, FURTHER, I AM
SHOCKED BY THE OUR OWN GOVERNMENT'S SUPPORT OF SUCH
BEHAVIOR.**

**THIS EXPORT OF DEATH AND DISEASE HAS BEEN CARRIED OUT
WITH THE SUPPORT OF OUR TRADE REPRESENTATIVES, OUR
STATE DEPARTMENT, OUR COMMERCE DEPARTMENT, AND OUR
AGRICULTURE DEPARTMENT.**

IT'S NOT A VERY PRETTY STORY. BUT THERE IT IS.

**LAST FALL, IN MY LAST OFFICIAL ACT AS SURGEON GENERAL, I
WAS ONE OF MORE THAN 30 WITNESSES AT A PUBLIC HEARING
ON INVESTIGATION INITIATED UNDER SEC. 302 OF THE TRADE
ACT OF 1974.**

I MADE MY POINT, AND CONCLUDED BY SAYING,

**"IT IS THE HEIGHT OF HYPOCRISY FOR THE UNITED STATES,
IN OUR WAR AGAINST DRUGS, TO DEMAND THAT FOREIGN
NATIONS TAKE STEPS TO STOP THE EXPORT OF COCAINE TO
OUR COUNTRY WHILE AT THE SAME TIME WE EXPORT NICOTINE,
A DRUG JUST AS ADDICTIVE AS COCAINE TO THE REST OF
THE WORLD."**

THIS NICOTINE DRUG CARTEL, THE TRANS-NATIONAL TOBACCO COMPANIES TRAVEL FROM COUNTRY TO COUNTRY WITH A GREAT DEAL OF CASH --NOT CREDITS, NOT PROMISES, BUT HARD, COLD CASH. THEREFORE IT IS VERY DIFFICULT FOR ANY GOVERNMENT STRUGGLING TO GET ITS ECONOMY IN ORDER TO TURN AWAY SUCH WELL-PAYING GUESTS.

THESE COMPANIES BUILD FACTORIES AND EMPLOY MANY PEOPLE. THEY SPEND LARGE SUMS ON ADVERTISING AND SPECIAL EVENTS. IN SOME AREAS THEY VIRTUALLY SUBSIDIZE THE MEDIA.

**IN MY VIEW THE SEVEN MAJOR TRANS-NATIONAL TOBACCO
COMPANIES --FOUR AMERICAN AND THREE BRITISH-- ARE
TOGETHER THE VERY MODEL OF A COLONIAL POWER. THEY
OSTENTATIOUSLY PUMPING LARGE AMOUNTS OF MONEY INTO
THE ECONOMIES OF A POOR NATION, ONLY TO EXACT LARGER
SUMS OF WEALTH IN THE FORM OF CROPS, MANUFACTURED
GOODS, OR CASH.**

**UNFORTUNATELY THESE COMPANIES ALSO EXTRACT THE
PHYSICAL HEALTH OF THE PEOPLE OF EVERY COUNTRY THEY
COLONIZE. YOU CAN SEE IT IN THE RISING MORBIDITY AND
MORTALITY RATES FROM WESTERN SMOKING-RELATED
DISEASES.**

**THE ALARMING THING ABOUT THIS HABIT OF CIGARETTE
SMOKING IS THAT, WHEN IT INVADES A NEW MARKET, IT DOES
SO WITH IMMENSE SPEED AND IMPACT.**

ACCORDING TO THE WORLD HEALTH ORGANIZATION, BETWEEN 1971 AND 1981 CIGARETTE CONSUMPTION INCREASED IN ASIA AND LATIN AMERICA AT A RATE 30 PERCENT AHEAD OF THE RATE OF POPULATION INCREASE ... IN AFRICA, IT ROSE 77 PERCENT AHEAD OF THE RISE IN POPULATION.

THE PEOPLE'S REPUBLIC OF CHINA, FOR EXAMPLE, REPORTED THAT 90 PERCENT OF ITS MEN SMOKE ... PAPUA NEW GUINEA REPORTED THAT 85 PERCENT OF ITS MEN NOW SMOKE ... THE PHILIPPINES, 78 PERCENT ... AND SO ON.

W.H.O. IS DOING A GOOD JOB!

WHEN DR HIROSHI NAKAJIMA, D-G- OF WHO ADDRESSED THE 7TH WORLD CONFERENCE ON SMOKING AND HEALTH (AND HOW I REGRETTED THE INTRUSION OF TV IN MY PLANS TO BE THERE), HE APPEALED TO NATIONAL AUTHORITIES AND ALL CONCERNED - AT ALL LEVELS - TO JOIN FORCES IN A SWEEPING ~~OFFENSIVE~~ ^{OFFENSIVE} ~~AIMED~~ ³⁵ AT ECONOMIC TOBACCO AS A MAJOR THREAT TO THE HEALTH OF FUTURE GENERATIONS - * WE SHOULD JOIN NAKAJIMA

AND LISTEN CAREFULLY TO THIS: IN CHINA, WHERE COUPLES ARE SUPPOSED TO HAVE ONLY 1 CHILD PER FAMILY, THERE ARE AT THIS MOMENT AN ESTIMATED 50,000,000 CHILDREN WHO WILL DIE PREMATURELY FROM SMOKING.

THE RECENT NEWS THAT IN 15 ASIAN COUNTRIES COMMUNICABLE DISEASE WAS NO LONGER THE NUMBER ONE PUBLIC HEALTH MENACE WAS NOT REALLY GOOD NEWS.

WHY?

BECAUSE IN THOSE ASIAN COUNTRIES TODAY, THE TOP THREE CAUSES OF DEATH ARE -- CAN YOU GUESS? -- THE SAME THREE SMOKING-RELATED CAUSES OF DEATH THAT PREVAIL HERE IN THE UNITED STATES: HEART DISEASE, CANCER, AND STROKE.

**IN OTHER WORDS, THE TOBACCO EPIDEMIC AND ITS LETHAL
CONSEQUENCES HAVE HIT ASIA ... AND -- THANKS TO OUR OWN
CIGARETTE INDUSTRY -- HAVE HIT ASIA HARD.**

**AND HERE'S WHERE WE DESERVE TO SQUIRM IN SHAME -- IN 10
OF 15 ASIAN COUNTRIES, AMERICAN CIGARETTES WERE THE
MOST COMMON KIND IMPORTED.**

**BUT THOSE AMERICAN CIGARETTES ARE A LITTLE DIFFERENT
OVERSEAS: FOR ONE THING, THEY DON'T CARRY THE SURGEON
GENERAL'S WARNING. AND FOR ANOTHER, MANY AMERICAN
CIGARETTES MANUFACTURED FOR EXPORT HAVE A HIGHER TAR
CONTENT AND ARE, THEREFORE, EVEN MORE DANGEROUS THAN
THE LOWER-TAR, FULLY-LABELLED PRODUCTS SOLD HERE IN
THE UNITED STATES.**

WE ALL KNOW THAT DR. JAMES MASON - ASIT -
 DID NOT TESTIFY BEFORE A CONGRESSIONAL COMMITTEE
 LAST WEEK,
 ON THE EXPORT OF TOBACCO. HE STILL BELIEVES
 WHAT HE SAID IN PERIT, EARLIER THIS
 YEAR.

YESTERDAY - ON FIRE THE NATION - TIME SEC. 7
 AS HE SAID, THERE
 ORH. H.S. SAID, IT WAS A TRADE ISSUE
 NOT A HEALTH ISSUE. WHAT A SORRY
 STATE OF AFFAIRS.

HAVE WE TAKEN A CUE FROM THE
 TOBACCO COMPANIES? WILL WE USE
 THEIR DOUBLE-SPEAK? IT SEEMS TO
 ME, IF WE CAN REFUSE TO EXPORT
 TO SOME COUNTRIES
 WEAPONS, WE CAN ALLOW A
 DEVELOPING NATION TO REFUSE TO IMPORT TOBACCO.

NOW, LET ME MAKE SURE YOU UNDERSTAND WHAT I JUST SAID.

I SAID THAT SOME AMERICAN CIGARETTE MANUFACTURERS -- AS

KNOWLEDGE-ABLE AS I AM, CONCERNING THE HEALTH RISKS OF

SMOKING -- ^{PL} KNOWINGLY PRODUCE A MORE HARMFUL

CIGARETTE FOR EXPORT THAN THEY PRODUCE FOR DOMESTIC

CONSUMPTION. ^{TE} I AM EMBARRASSED AS AN
AMERICAN - AND I KNOW THERE ARE MILLIONS OF
DECENT FOLKS WHO FEEL THE SAME WAY.

OUR EXPORT OF TOBACCO PRODUCTS IS A MORAL OUTRAGE,

↓
NOT ONLY

~~AND~~ IT IS ALSO FOOLISH.

WE MUST CONVINCE OUR GOVERNMENT THAT THERE IS NO
SENSE IN PLANNING FOR THE LONG-TERM ECONOMIC HEALTH
OF A FOREIGN SOCIETY, ~~AND~~ PROVIDING THAT SOCIETY WITH
FOREIGN AID ~~ON THE ONE HAND~~, IF THE PHYSICAL HEALTH OF
THE PEOPLE OF THAT SOCIETY IS FUNDAMENTALLY
ENDANGERED DURING THAT SAME LONG TERM.

AGAINST THIS INTERNATIONAL OFFENSIVE OF THE TOBACCO
FIRMS

THE INTERNATIONAL COMMUNITY IS FIGHTING BACK, EVEN
THOUGH THEIR RESOURCES ARE SLIGHT.

**THE WORLD HEALTH ORGANIZATION IS TO BE CONGRATULATED
FOR CONFRONTING HEAD-ON THE TOBACCO INDUSTRY'S BRAZEN
CHALLENGE TO THE PHYSICAL WELL-BEING OF MILLIONS UPON
MILLIONS OF THE WORLD'S MEN, WOMEN, AND CHILDREN.**

**THE CIGARETTE SMOKING EPIDEMIC BEING WHAT IT IS -- A
CROSS BETWEEN PUBLIC HEALTH AND INTERNATIONAL
COMMERCE -- WE FIND, COUNTRY-BY-COUNTRY, THAT THE
STRONGEST OPPONENTS ARE OFTEN CONSUMERS AS WELL AS
PHYSICIANS.**

IN FACT, THE I.O.C.U., OR INTERNATIONAL ORGANIZATION OF CONSUMERS UNIONS -- NOT A U.N. GROUP, BY THE WAY -- HAS A SEPARATE ANTI-SMOKING SUB-GROUP THAT GOES BY THE NAME OF "ACTION GROUPS TO HALT THE ADVERTISING AND SPONSORSHIP OF TOBACCO" -- OR "AGHAST."

ONE OF "AGHAST'S" KEY ACTIVITIES IS TO SUPPORT THE WORLD HEALTH ORGANIZATION'S ANNUAL "WORLD NO-TOBACCO DAY". AFFILIATED MEMBERS OF "AGHAST" -- MOSTLY NATIONAL CONSUMER COUNCILS -- HAVE HAD ROUSING AND SUCCESSFUL "NO SMOKING DAYS" IN PLACES LIKE FIJI, HONG KONG, INDIA, MALAYSIA, AND THAILAND.

**IF THIS SOUNDS SUSPICIOUSLY LIKE OUR OWN "GREAT
AMERICAN SMOKE-OUT," WHICH WE SPONSOR HERE EVERY YEAR
IN NOVEMBER, THAT'S BECAUSE IT IS.
AND I'M PLEASED TO SAY THAT OUR P.H.S. OFFICE ON SMOKING
AND HEALTH HAVE HAD SOMETHING TO DO WITH SPREADING
THE IDEA TO OUR FRIENDS OVERSEAS.**

**THE IDEA OF A SMOKE-FREE SOCIETY IS GETTING SERIOUS
CONSIDERATION IN ISRAEL AND GREAT BRITAIN, FOR EXAMPLE.
I'VE TRAVELED TO BOTH COUNTRIES TO BE PART OF THE
EFFORT.**

**BUT SO FAR THESE EFFORTS ARE TOO SMALL TO BLUNT THE
TOBACCO OFFENSIVE. THEY ARE TOO WEAK TO LOOSEN
TOBACCO'S ECONOMIC GRIP ON THE WORLD.**

SO, WHAT CAN WE DO?

**I'M SURE THAT IN THE SESSIONS TO FOLLOW, YOU WILL HEAR
AND THEN DISCUSS A NUMBER OF VERY SPECIFIC SUGGESTIONS.**

I'LL OFFER JUST A FEW.

**OUR CONFERENCE THEME RECOGNIZES THE GLOBAL
CHARACTER OF THE STRUGGLE AGAINST SMOKING AND THE
POWER OF THE TOBACCO INTERESTS.**

**WE AMERICANS MUST CONDUCT THE BATTLE ON THE HOME
FRONT AS WELL AS OVERSEAS.**

**HERE AT HOME, WHILE WE WORK THROUGH THE LEGISLATIVE
AND REGULATORY PROCESS TO CHANGE AMERICAN TRADE
POLICIES, WE MUST CONTINUE THE ECONOMIC PRESSURE
AGAINST THE TOBACCO COMPANIES IN THE UNITED STATES.**

**EVEN THOUGH THE TIDE IS RUNNING AGAINST THEM, WE
CANNOT GIVE THEM A RESPITE.**

**WE MUST CONTINUE THE MOMENTUM TOWARD A SMOKE-FREE
SOCIETY BY THE YEAR 2000.**

**OUR EDUCATIONAL EFFORTS ARE SUCCESSFUL, AND THEY MUST
BE EXPANDED.**

**WE MUST TARGET INDIVIDUAL ISSUES, FOCUS OUR EFFORTS, AND
PREVAIL.**

**IN SOME CRITICAL AREAS THERE IS STILL LITTLE MORE THAN
LIP SERVICE PAID TO STOPPING SMOKING.**

**FOR EXAMPLE, MEDICAL SCHOOL CURRICULA SPEND TOO
LITTLE TIME ON ADDICTION AND THE WAYS THAT DOCTORS CAN
TEACH THEIR PATIENTS HOW TO STOP SMOKING.**

**THE SAD FACT IS PROBABLY ONE HALF THE DOCTORS IN
AMERICA FAIL TO PROVIDE ADVICE AGAINST SMOKING, EVEN
THOUGH WE KNOW THAT A DOCTOR'S ADVICE IS THE SINGLE
MOST EFFECTIVE STIMULUS TO STOP SMOKING.**

THERE IS NO MONETARY INCENTIVE FOR PHYSICIANS TO TREAT SMOKING. ALTHOUGH STATES REQUIRE INSURANCE COVERAGE FOR ALCOHOL AND DRUG TREATMENT, NO STATE OFFERS COVERAGE FOR NICOTINE CESSATION PROGRAMS, EVEN THOUGH THE HEALTH COST OF NICOTINE ADDICTION IS MUCH HIGHER.

FOLLOWING THE SURGEON GENERAL'S REPORT OF 1988, THERE WAS CLEAR EVIDENCE OF THE SKYROCKETING COST OF HEALTH CARE, AND YET THE HEALTH INSURANCE INDUSTRY HAS RESPONDED LIKE NERO.

THEY SAY THEY USUALLY DON'T COVER PREVENTIVE PROGRAMS.

**WHAT SENSE DOES IT MAKE TO SPEND \$150,000 ON THE
TERMINAL CANCER ILLNESS OF ONE OF THEIR INSURED, BUT
NOT BE WILLING TO FORK OVER ABOUT \$200 TO GET THE SPOUSE
OF THAT PERSON TO STOP SMOKING AND PREVENT THE SAME
DISEASE DOWN THE ROAD?**

**WITH OVER 90% OF THE SMOKERS WANTING TO QUIT, IT IS AN
OUTRAGE THAT THERE IS NOT LEGISLATION REQUIRING
REIMBURSEMENT FOR APPROVED SMOKING CESSATION
PROGRAMS.**